

EMBASSY OF BURKINA FASO

2340 Massachusetts Avenue, N.W.

Washington D.C. 20008

Tel: (202) 332-5577

Fax: (202) 667-1882

VISA APPLICATION

Photo

Visa n° (for Embassy use only)

Mr., Mrs., Ms.

(first name first, please print)

Place and date of birth

Nationality

U.S. Address

Occupation

Telephone: Home Work

Type of Passport : (check one) ☐ Regular ☐ Diplomatic
☐ Official ☐ Laissez-passerPassport number Issued on in Valid until.....
(name of issuing country or Authority)

Number of entries requested Transit to

Purpose of trip (check one)

☐ Tourism ☐ Conference ☐ Business
☐ Transit ☐ Family ☐ Other

If other, please describe

Are you accompanied by children ? ☐ Yes ☐ No

If yes, number Ages

Date of departure from U.S.

Date of arrival in Burkina Faso

Arrival by : ☐ Flight ☐ Road ☐ Train

Date of departure from Burkina Faso

Address in Burkina Faso

Please include the following :

- original passport
- 2 copies of this form
- 2 ID photos
- \$50 money order or company check
(no cash or personal checks)
- yellow fever certificate
- prepaid return self-addressed envelope

Place and date of application

Signature of passport holder

VISA PROCESSING : 2 DAYS MAXIMUM